PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alana, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notification.	ed below or directed of	for tran ng the herwise	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new of	of n	ON FEE (if requi naintenance fees w pondence address;	ired). E vill be and/or	Blocks 1 through 5 sh mailed to the current (b) indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
68933 7590 05/01/2007								9		
MARVELL-FHFGD						Cer reby certify that th	tificate is Fee(s	of Mailing or Transn s) Transmittal is being	nission denosited with the United	
c/o FINNEGAN, HENDERSON, FARABOW, GARNETT et. al. 901 NEW YORK AVENUE WASHINGTON, DC 20001-4413						I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
WASHINGTON		(Depositor's name)								
		(Signature)								
		(Date)								
APPLICATION NO.	PLICATION NO. FILING DATE		FIRST NAMED INVE			TOR ATTORNEY DOCK			CONFIRMATION NO.	
10/788,725	Michael W. Morro	lichael W. Morrow MP1439 6814				6814				
TITLE OF INVENTION: LOW POWER SEMI-TRACE INSTRUCTION CACHE										
APPLN. TYPE	SMALL ENTITY	ISS	SUE FEE DUE	PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1400	\$300		\$0		\$1700	08/01/2007	
EXAMINER			ART UNIT	CLASS-SUBCLASS						
KIM, HONG CHONG 2185			2185	711-125000	0					
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list										
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
_				(2) the name of a single firm (having as a member a 2						
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	4 то в	E PRINTED ON T	THE PATENT (print o	r typ	oe)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Marvell 1	International	Ltd.		Hamilto:	n.	Bermuda				
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government										
4a. The following fee(s) Issue Fee	Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.									
Publication Fee (No small entity discount permitted)				Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies				The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number Olo 2916 (enclose an extra copy of this form).						
				overpayment, to I	Depo	sit Account Number	er <i>Q(a</i>	-0916 (enclose an	extra copy of this form).	
 Change in Entity Sta a. Applicant claim 	.tus (from status indicate is SMALL ENTITY stati			☐ b. Applicant is no	lon	ger claiming SMAI	LL ENT	ΓΙΤΥ status. See 37 CF	R 1.27(g)(2)	
	d Publication Fee (if req	uired) v	vill not be accepted	d from anyone other th					e assignee or other party in	
interest as shown by the	Tecords of the Officer Str	^\s	int and Trademark	Office.	*****	***************************************	•••••	***************************************	· · · · · · · · · · · · · · · · · · ·	
Authorized Signature			Date Ju]	y 31	l, 2007					
Typed or printed name Linda J. Thayer ()				Registration No. 45,681						
This collection of inform an application. Confiden	nation is required by 37 (itiality is governed by 35	CFR 1.3 U.S.C.	11. The information 122 and 37 CFR	on is required to obtain	or r	etain a benefit by t	he publ	ic which is to file (and to complete, including	by the USPTO to process)	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.